_	Under the Pape	emon Re	duction A	ca cd 199	, no penso	04 679	required to res	pond (	U.S. Peteré 9 a collection	end i	redement	Office:	US.	OLON (7) 1/2 OEPARTM	OOS ENT	OM8 0651 OF COMMI	Ø.
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information units  PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875 Effective December 8, 2004												Applied to Door of Mary Control					
APPLICATION AS FILED - (Column 1)						PART ( (Column 2)			SMALL ENTITY				OTH SMAL		THE	ER THAN	
L	FOR	MUMBER FILED			NUMBER EXTRA				RATE (I) FEE (I)				·		-		
	Basic fee (37 CFR 1 18(4) (b) or (c))		IVA		,	N/A		$\dashv$	N/A			_		RATE	\$)	PEE!	
\$	SEARCH FEE (37 CFR 1 16(4), (4, or (m))		NA			N/A		7	NA \$250				N/A	·-	300.00	<u>)</u>	
EXAMINATION FEE (37 CFR 1 16(0), (b), or (00)			N/A			N/A					-		. NIA		\$500	_	
TOTAL CLAMS (3) OFR 1 18(4)								[			\$100		ı	· NA		\$200	
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Æ.	TULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(1))							7	+180=			1	ŀ	+360+	$\dashv$		
If the difference in column 1 is less than zero, enter "O" in column 2.								TOTAL	寸		7	L		4		_	
					DED - P					_		٠,		TOTAL		· · · · · ·	-
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EINCHIEN A	10 25/	REM	AINING TER IOMENT		NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE (S)		ADDI- TIONAL FEE (5)		Γ	RATE (S)	Ī	- ADDI- TIONAL	1
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1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@)							lΓ	+180=	1	/	OR.	上	360=		/	$\mathbf{I}$
	16/06	Mat -				•	,		TOTAL POOL FEE	Ų		OR	1	OTAL OOL FEE	Ł		}
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Ľ	Independent OF CFR 1 SEAD	. 1		***	Į		•	_	K100			OR		00	-		
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Ľ	PURST PRESENT	TRON OF I	<b>WILTIPLE</b>	OEPENDĖ	NT CLARA	DT CFR	1.16@)	Ι.	160=			OR	4.5	360=			

\* If the entry in column 1 is less than the entry in column 2, write "o' in column 3.

\* If the Trighest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

\* The Trighest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate bear in column 1.

Is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is poremed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to taste 12 minutes to complete buding gethering, preparing, and submitting the completed application forms the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent DRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL

ADD' FEE

OR

TOTAL

If you need assistance in completing the form, cell 1-860-PTO-9199 and select option 2.